

Application or Docket Number

APPLICATION AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
SIG FEE OFR 1.16(e), (b), or (c)]		
ARCH FEE OFR 1.16(k), (l), or (m)]		
MINIATION FEE OFR 1.16(o), (p), or (q)]		
AL CLAIMS OFR 1.16(j)]	minus 20 =	
DEPENDENT CLAIMS OFR 1.16(h)]	minus 8 =	
ICATION SIZE FR 1.16(e)]	If the specification and drawings exceed 100 sheets of paper, the application size (see due to \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(b).	
IPLE DEPENDENT CLAIM PRESENT (87 OFR 1.16(j))		

OTHER THAN SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

difference in column 1 is less than zero, enter "0" in column 2.

(Column 1)	(Column 2)	(Column 3)
DATE		

SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
X 25 =	3
X 100 =	
180	
TOTAL ADD'L FEE	

OTHER THAN SMALL ENTITY	
RATE (\$)	ADDITIONAL FEE (\$)
OR X. 50 =	
OR X. 200 =	
OR 360	
OR TOTAL ADDITIONAL FEE	

(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
total 11.16(1)	Minus	=
refund 11.16(4)	Minus	=
<p>ation Size Fee (37 CFR 1.16(e))</p> <p>Presentation of Multiple Dependent Claim (37 CFR 1.16(f)).</p>		

RATE (\$)		ADDITIONAL FEE (\$)
X	=	
X	=	
TOTAL ADD'L FEE		

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X	=
OR	X	=
OR		
OR	TOTAL ADD'L FEE	

highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"; highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.